PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									Application or Docker Number 10/8/4, 926 523 18/T) D/488				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN	ITITY	OR		R THAN ENTITY
F	OTAL CLAIM	S	34			•		RATE FEE		FEE	7	BATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FEE 385.0		385.00	OR	BASIC FEE	
T	OTAL CHARGE	34 m	34 minus 20=		• 14		XS 9=			ОП	X\$18=	252	
iN	DEPENDENT (3 minus 3 =		a			X43=		· <u> </u>	OR	X86=	-	
M	ULTIPLE DEPE	NDENT CLAIM	RESENT:					+145=				+290=	-سند ،
* If the difference in column 1 is less than zero, enter-10-in column 2								TOTAL			OR OR		1022
`.	CLAIMS AS AMENDED - PART II										UH	OTHER	
<u> </u>	-12-06 (Column 1)			(Colum				SMALI	LE	NTITY	OŘ	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE
Š	Total	.30	Minus	- 34	1	· O		X\$ 9=			OR	X\$18=	
ME	Independent	1.2	Minus	- 3		= 0		X43=	1		OR	X86=	
_	FIRST PRES	ULTIPLE DE	PENDENT	CLAIM			+145=	Ť			+290=	X	
								TOTAL	╁		OR	TOTAL	/ \
	(Column 1) (Column 2) (Column 3)								١L		OR ,	NODIT. FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE	I	RATE	ADDI- TIONAL FEÈ
AMENDMENT	Total	•	Minus	**		=	. [X\$ 9=	Γ	-	OR	X\$18=	
	Independent	_ <u>`</u>		***		≂ .,		X43=	T		OR	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEI	PENDENT	CLAIM			.146	t		Ī	.000	
				٠.			L	+145=	1		OR L	+290= TOTAL	
							DOIT. FEE	L		OR A	DOTT. FEEL		
. 1		(Column 1) CLAIMS	•	(Column		(Column 3)	_	.	·				
בוער בוער		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	JSLY	PRESENT EXTRA		RATE	Π	DDI- ONAL FEE		RATE	ADDI- TIONAL FEE
AMENDIMENT	Total	*	Miņus	**		8		X\$ 9=			OR	X\$18=	
	Independent	hdependent • Minus FIRST PRESENTATION OF MULTIPLE DEPE				-		X43=	Γ		OR P	X86=	
			145=			DR	+290=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											`°. ୮	TOTAL DOTT, FEE	
	the "Highest Nur	mber Previously Pa ber Previously Paid	id For IN THE	S SPACE is I	ess thar	n 3. enter "3."			brot		^4		

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